

WORK INSTRUCTION

Title: **Repair of ICV Upper/Lower Honeycomb Spacer**

Instruction No. CH.18

Rev. 0, January 2002

Page 1 of 4

Approved for Use by: Michael R. Brown Effective Date: January 2002

Applicable Drawings:

- 2077-500SNP (Sheet 6) - TRUPACT-II Packaging SARP Drawings
- 707-SAR (Sheet 3) - HalfPACT Packaging SARP Drawings

SARP Requirements:

- None

Tools Required:

- Small Grinder
- Welder
- Drill

Spare Parts Required:

- None

Materials Required:

- Weld filler material per approved weld procedure

Safety Requirements:

- Safety will be observed in accordance with site requirements.

Prerequisite Conditions:

- ICV must be open and spacer(s) removed.
- Welder must be qualified in accordance with Section IX of the ASME Code for the process being used.
- Weld procedures and inspection procedures must be approved by the customer prior to use on this project.

Instruction Steps:

- All steps in this procedure must be documented on the data sheets or attach an approved manufacturing traveler to the data sheet which documents the corresponding steps.
- This instruction **is not required to be attached** to the Maintenance Record but may be used as a checklist during performance of maintenance.

- ☐ ICV Upper Honeycomb Spacer
- ☐ ICV Lower Honeycomb Spacer

Note: The following steps may be repeated as necessary.

- 1.0 Indicate on Attachments 1 & 2 which hole(s) needs to be repaired. This requires a reference mark on the honeycomb.
- 2.0 Weld build up as required to restore holes to a configuration capable of re-machining to original condition.
- 3.0 Record the weld procedure number, revision, and effective date of procedure.
- 4.0 Record the weld filler CMTR Number.
- 5.0 Perform visual weld inspection per AWS D1.1.
- 6.0 Re-machine/drill affected holes in accordance with Dwg. # 2077-500SNP, Sheet 6 or Dwg. 707-SAR, Sheet 3.
- 7.0 Perform a dimensional inspection of re-machined hole(s) per Dwg. # 2077-500SNP, Sheet 6 or Dwg. 707-SAR, Sheet 3.
- 8.0 Attach a copy of the inspection report(s) and CMTR(s) to the traveler or data sheet.

Verification Requirements:

- 1.0 Work performed is described on maintenance record.
- 2.0 Work instruction is listed on maintenance record.
- 3.0 Data sheet (Work Instruction WI-CH.18, Attachments 1 & 2) or traveler is attached to maintenance record.

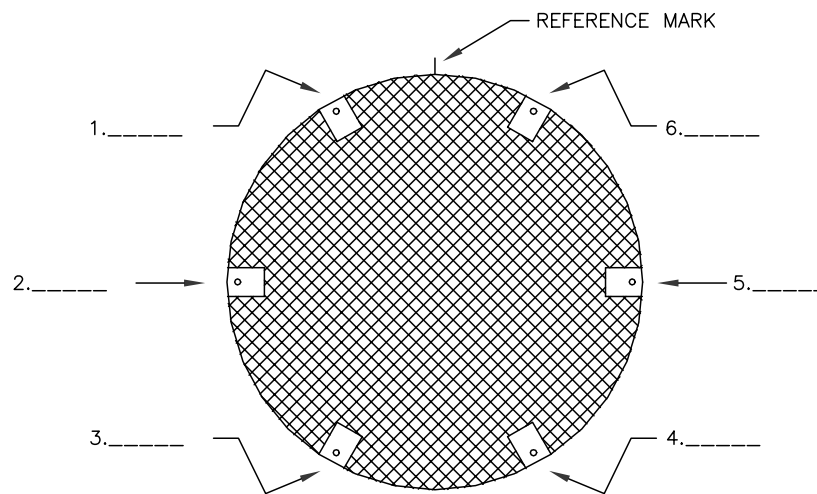
ATTACHMENT 1 - DATA SHEET

Packaging Serial #: _____ Date: _____ Job No.: _____		
STEP	OPERATION	SIGNOFF Operator / Date
1.	Check appropriate block(s) and circle appropriate number(s) <input type="checkbox"/> ICV Upper Spacer Screw Holes # 1, 2, 3, 4, 5, 6 <input type="checkbox"/> ICV Lower Spacer Screw Holes # 1, 2, 3, 4, 5, 6	QC
2.	Welding complete	
3.	Record weld procedure number, rev, and date _____/_____/_____	
4.	Record filler CMTR # _____	
5.	Perform visual weld inspection(s).	QC
6.	Re-machine/drill affected holes per Dwg. 2077-500SNP, Sheet 6, or Dwg 707-SAR, Sheet 3.	
7.	Perform dimensional inspection of re-machined hole(s)	QC
8.	Attach inspection report(s), CMTR(s), etc.	QC

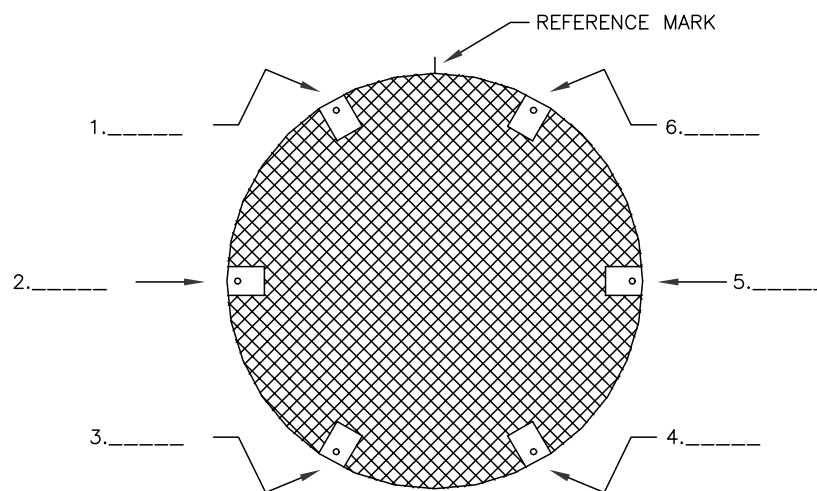
ATTACHMENT 2 - ICV SPACERS

ATTACHMENT 2

UPPER SPACER



LOWER SPACER



QA: _____

DATE: _____